

# Item 24.1 Financing and implementation of the Programme budget 2022-2023 and outlook on financing of the Programme budget 2024-2025

## Contents

- [In focus](#)
- [Background](#)
- [PHM Comment](#)
- [Notes of discussion](#)

## In focus

The Director-General will submit a report ([EB154/27](#)) on the financing and implementation of the Programme budget 2022–2023 and provide an update on the financing of the Programme budget 2024–2025. The Board will be invited to note the report and provide further guidance.

## Background

Tracker links to previous discussions of [PB22-23](#) and [PB23-24](#).

[Programme budget web portal for 2022/23](#)

## PHM Comment

This document (EB154/27) provides an update on financing the 2022-23 programme budget, building on earlier updates from the January 2023 EB and the May 2023 WHA meetings ([EB152/26](#) and [A76/18](#)).

As with previous updates, EB154/27 sounds a positive note with regard to the amount of funding available or projected for the Program budget. The Program budget of US\$6726m for the 2022-23 biennium is projected to reach 138% (US\$9,315m). The increase is because of additional funding for event-driven segments of the Program (Polio eradication funding was 246% of the approved budget while Emergency operations and appeals funding was 303%). The core work of WHO (i.e. its 'base' programs) is projected to receive 96% of its approved budget of US\$4968m, and WHO's Special Programs is projected to receive 84% of its US\$199m.

Table 2 provides a more granular breakdown of where funding for the base programs goes. As in previous reports, we continue to see that some priority areas receive more money than they need while others receive less. These have previously been referred to as 'pockets of poverty'.

To give an example, priority area 1.1 (improved access to quality essential health services) receives 118% funding while 2.1 (countries prepared for health emergencies) receives 55%.

The report informs us that the base programs are funded by US\$957m in assessed contributions (ACs) and US\$4,012m in voluntary contributions (VCs) (i.e. 24% ACs; 76% VCs). Confusingly, the report also states that "Voluntary contributions (specified and thematic) represent 62.2% of total financing for base programmes, including projections). The apparent discrepancy between 76% and 62.2% could be because the 'core' VCs are not included in the total. These 'core' VCs were projected to be around \$150m in WHO's 2022-23 Program Budget (p28), so this would account for the difference.

The bottom line is that the base programs of WHO (not the total Program budget, just the base segment - its core work) is funded primarily by specified and inflexible VCs. This is important because it illustrates the need to increase the amount of flexible funding going to the base segment. The "aspiration", approved by Member States at the WHA in 2022, is to increase the amount of ACs for the base segment to 50% of the 2022-2023 base budget by the biennium 2028-2029 ([WG on Sustainable Financing](#)).

With regards to the future and the 2024-25 budget, we already know from the draft 14th GPW that there isn't going to be an increase in the base segment: it's going to remain at US\$4968. Table 4 of EB154/27 (reproduced below) gives us a sense of the funding gap.

Budget segment	Programme budget 2024–2025	AC	VC	Total	Gap (US\$)	Gap (%)
Base	4 968	1 146	1 281	<b>2 427</b>	2 542	51%
Emergency response and appeals	1 000	0	402	<b>402</b>	598	60%
Polio eradication	694	0	657	<b>657</b>	38	5%
Special programmes	172	3	46	<b>49</b>	123	71%
Total Programme budget	<b>6 835</b>	<b>1 148</b>	<b>2 386</b>	<b>3 534</b>	<b>3 300</b>	<b>48%</b>

Table 4. Projected financing for the Programme budget 2024–2025 by segment as at 30 September 2023

The table shows the increase in ACs (US\$1,146m) in accordance with the 'aspiration' noted above, and it also shows that some VCs are already being projected. The new Investment Round, set to launch in the final quarter of 2024, needs to ensure that the base segment is fully funded for the period of the 14th GPW (2025-28). In the short term, it at least has to secure commitment from donors sufficient to cover the 2024-25 biennium.

PHM urges the Board to confront the urgent need to increase the budget for 2024-25 for both the base segment and Emergency operations. The demand for these two categories in the coming biennium is going to be much higher in view of widening conflict, deepening inequality, accelerating global heating, looming zoonotic outbreaks, and increasing numbers of refuge seekers.

## Notes of discussion